

Sector  
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to: Director of the U.S. Patent & Trademark Office, Washington, DC 20231 on the date indicated below.

*Jodi A. Calderon*  
Jodi A. Calderon

Date: 5-18-01

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

|              |                      |                              |
|--------------|----------------------|------------------------------|
| Serial No.:  | 09/769,577           | Examiner: (not yet assigned) |
| Filing Date: | January 25, 2001     | Group Art Unit: 1764         |
| Inventor:    | Johnston, et al.     | Attorney Docket No. 101.003  |
| Assignee:    | Meggitt (UK) Limited |                              |
| Invention:   | Chemical Reactor     |                              |

RESPONSE TO NOTICE TO FILE MISSING PARTS OF APPLICATION

Assistant Commissioner for Patents  
Box Missing Parts  
Washington, D.C. 20231

Sir:

In response to the Notice to File Missing Parts of Nonprovisional Application, Filing Date Granted, mailed March 8, 2001 in the above-captioned application, applicant submits the following:

- 1) Notice to File Missing Parts of Nonprovisional Application filed under 37 CFR 1.53(b), Filing Date Granted.
- 2) Executed 2-page Declaration.
- 3) Executed Assignment document, Recordation Form Cover Sheet.
- 4) Preliminary Amendment.
- 5) Request for Corrected Filing Receipt.
- 6) Information Disclosure Statement with PTO-1449 reference listing.

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110.00 CP

U.S. Serial No. 09/769,577 to Johnston et al.

Art Unit: 1764

Page 2

- 7) A check in the amount of \$682.00 which includes: 1) late filing of applicant's Declaration (\$130.00), 2) a request for a one-month extension of time (\$110), 3) the submission of nine additional claims in excess of twenty (\$162), 4) the submission of three additional independent claim in excess of three (\$240) by a large entity, and 5) payment of the assignment recordation fee (\$40). A Fee Transmittal Form PTO/SB/17 (11/00) is also enclosed.

The Director is hereby authorized to charge payment of any extension or additional fees associated with this or any other communication or credit any overpayment to Deposit Account No. 50-1170.

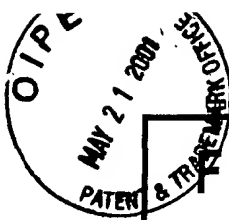
Respectfully submitted,



Timothy E. Newholm  
Registration No. 34,400

Dated: May 18, 2001

BOYLE, FREDRICKSON, NEWHOLM,  
STEIN & GRATZ, S.C.  
250 Plaza, Suite 1030  
250 East Wisconsin Avenue  
Milwaukee, WI 53202  
Telephone: (414) 225-9755  
Facsimile: (414) 225-9753



|   |  |                          |                     |         |
|---|--|--------------------------|---------------------|---------|
| <b>FREE TRANSMITTAL</b><br><b>for FY 2001</b><br><br><i>Patent fees are subject to annual revision.</i> |  | <b>Complete if Known</b> |                     |         |
|   |  | Application Number       | 09/769,577          |         |
|   |  | Filing Date              | January 25, 2001    |         |
|   |  | First Named Inventor     | Johnston et al.     |         |
|   |  | Examiner Name            | Unassigned          |         |
|   |  | Group Art Unit           | 1764                |         |
| TOTAL AMOUNT OF PAYMENT   |  | (\$682)                  | Attorney Docket No. | 101.003 |

| <b>METHOD OF PAYMENT</b>  |                       | <b>FEE CALCULATION (continued)</b> |                       |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
|---|-----------------------|------------------------------------|-----------------------|---|-----------------------|-----------------|----------|-----|-------|-----|---------|------------------------|-------|--------------------|-----|-----|-----|-----------------------------------|--|-----|-----|-----|-----|---------------------------------------|--|-----|-----|-----|-----|---|--|-----|-----|-----|----|---|--|---------------------|--|--|--|--|----------------|--|--|--|--|
| 1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:<br><br>Deposit Account Number: 50-1170<br>Deposit Account Name: Boyle Fredrickson Newholm Stein & Gratz S.C.<br><br><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17<br>Applicant claims small entity status. See 37 CFR 1.27  |                       | 3. <b>ADDITIONAL FEES</b>          |                       |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 2. <input checked="" type="checkbox"/> Payment Enclosed:<br><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other  |                       |                                    |                       |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| <b>FEE CALCULATION</b>  |                       |                                    |                       |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 1. <b>BASIC FILING FEE</b>  |                       |                                    |                       |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| <table border="1"><thead><tr><th>Large Entity Fee Code</th><th>Large Entity Fee (\$)</th><th>Small Entity Fee Code</th><th>Small Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>101</td><td>710</td><td>201</td><td>355</td><td>Utility filing fee</td><td></td></tr><tr><td>106</td><td>320</td><td>206</td><td>160</td><td>Design filing fee</td><td></td></tr><tr><td>107</td><td>490</td><td>207</td><td>245</td><td>Plant filing fee</td><td></td></tr><tr><td>108</td><td>710</td><td>208</td><td>355</td><td>Reissue filing fee</td><td></td></tr><tr><td>114</td><td>150</td><td>214</td><td>75</td><td>Provisional filing fee</td><td></td></tr><tr><td colspan="5"><b>SUBTOTAL (1)</b></td><td><b>(\$)</b></td></tr></tbody></table>  |                       | Large Entity Fee Code              | Large Entity Fee (\$) | Small Entity Fee Code                                     | Small Entity Fee (\$) | Fee Description | Fee Paid | 101 | 710   | 201 | 355     | Utility filing fee     |       | 106                | 320 | 206 | 160 | Design filing fee                 |  | 107 | 490 | 207 | 245 | Plant filing fee                      |  | 108 | 710 | 208 | 355 | Reissue filing fee                                |  | 114 | 150 | 214 | 75 | Provisional filing fee                                    |  | <b>SUBTOTAL (1)</b> |  |  |  |  | <b>(\$)</b>    |  |  |  |  |
| Large Entity Fee Code   | Large Entity Fee (\$) | Small Entity Fee Code              | Small Entity Fee (\$) | Fee Description   | Fee Paid              |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 101   | 710                   | 201                                | 355                   | Utility filing fee  |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 106   | 320                   | 206                                | 160                   | Design filing fee   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 107   | 490                   | 207                                | 245                   | Plant filing fee  |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 108   | 710                   | 208                                | 355                   | Reissue filing fee  |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 114   | 150                   | 214                                | 75                    | Provisional filing fee                                    |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| <b>SUBTOTAL (1)</b>   |                       |                                    |                       |   | <b>(\$)</b>           |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 2. <b>EXTRA CLAIM FEES</b>  |                       |                                    |                       |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| <table border="1"><thead><tr><th>Total Claims</th><th>Extra Claims</th><th>Fee from Below</th><th>Fee Paid</th></tr></thead><tbody><tr><td>29</td><td>-20**= 9</td><td>18</td><td>= 162</td></tr><tr><td>6</td><td>-3**= 3</td><td>80</td><td>= 240</td></tr><tr><td colspan="3">Multiple Dependent</td><td>=</td></tr></tbody></table>   |                       | Total Claims                       | Extra Claims          | Fee from Below  | Fee Paid              | 29              | -20**= 9 | 18  | = 162 | 6   | -3**= 3 | 80                     | = 240 | Multiple Dependent |     |     | =   |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| Total Claims  | Extra Claims          | Fee from Below                     | Fee Paid              |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 29  | -20**= 9              | 18                                 | = 162                 |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 6   | -3**= 3               | 80                                 | = 240                 |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| Multiple Dependent  |                       |                                    | =                     |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
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| Large Entity Fee Code   | Large Entity Fee (\$) | Small Entity Fee Code              | Small Entity Fee (\$) | Fee Description   | Fee Paid              |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 103   | 18                    | 203                                | 9                     | Claims in excess of 20                                    |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 102   | 80                    | 202                                | 40                    | Independent claims in excess of 3                         |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 104   | 270                   | 204                                | 135                   | Multiple dependent claim, if not paid                     |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 109   | 80                    | 209                                | 40                    | **Reissue independent claims over original patent         |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| 110   | 18                    | 210                                | 9                     | **Reissue claims in excess of 20 and over original patent |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| <b>SUBTOTAL (2)</b>   |                       |                                    |                       |   | <b>(\$402)</b>        |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
| ** or number previously paid, if greater; For Reissues, see above   |                       |                                    |                       |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
|   |                       | Other fee (specify) _____          |                       |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |
|   |                       | <b>SUBTOTAL (3)</b> <b>(\$280)</b> |                       |   |                       |                 |          |     |       |     |         |                        |       |                    |     |     |     |                                   |  |     |     |     |     |                                       |  |     |     |     |     |   |  |     |     |     |    |   |  |                     |  |  |  |  |                |  |  |  |  |

|                     |                    |                                   |                |
|---------------------|--------------------|-----------------------------------|----------------|
| <b>SUBMITTED BY</b> |                    | <b>Complete (if applicable)</b>   |                |
| Name (Print/Type)   | Timothy E. Newholm | Registration No. (Attorney/Agent) | 34,400         |
| Signature           |                    | Telephone                         | (414) 225-9755 |
|                     |                    | Date                              | May 18, 2001   |

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231.  
DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant commissioner for Patents, Washington, DC 20231.

#3



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov

| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|------------------------|
| 09/769,577         | 01/25/2001          | Anthony Johnston      | 101.003                |

CONFIRMATION NO. 4506

## FORMALITIES LETTER



\*OC000000005839580\*

BOYLE FREDRICKSON NEWHOLM STEIN & GRATZ SC  
SUITE 1030  
250 EAST WISCONSIN AVENUE  
MILWAUKEE, WI 53202

Date Mailed: 03/08/2001

## NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

*Filing Date Granted*

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given TWO MONTHS from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is unsigned.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(e) of \$130 for a non-small entity, must be submitted with the missing items identified in this letter.
- **The balance due by applicant is \$ 130.**

*A copy of this notice **MUST** be returned with the reply.*

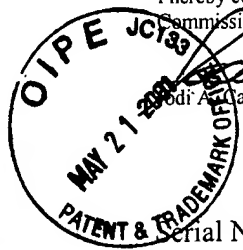
*Subh P. Maly*  
Customer Service Center

Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE

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240.00 OP  
162.00 OP  
130.00 OP



Rodri A. Calderon  
Rodri A. Calderon

5-18-01  
Date

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Serial No.: 09/769,577

Examiner: (not yet assigned)

Filing Date: January 25, 2001

Group Art Unit: 1764

Inventor: Johnston, et al.

Attorney Docket No. 101.003

Assignee: Meggitt (UK) Limited

Invention: *Chemical Reactor*

**REQUEST FOR CORRECTED FILING RECEIPT**


Office of Initial Patent Examination's  
Customer Service Center  
Commissioner of Patents  
and Trademarks  
Washington, DC 20231

Sir:

Applicant respectfully requests that the following change be made in the filing receipt, and that a new filing receipt be issued. The requested change is marked in red ink in the attached copy of the filing receipt. In particular, the section labeled "**Continuing Data as Claimed by Applicant**" should be changed to: THIS APPLN CLAIMS BENEFIT OF 60/184,007 02/22/2000 instead of THIS APPLN CLAIMS BENEFIT OF 60/184,004 02/22/2000 AND CLAIMS BENEFIT OF 60/084,007 05/04/1998. The nature and scope of this error can be confirmed by comparing the filing date and title of the actual priority document, 60/184,007, to the completely different filing date and title of the erroneously listed priority document.

No fees are believed to be payable with the filing of this communication. Nevertheless, the Director is hereby authorized to charge payment of any additional fees associated with this or any other communication or credit any overpayment to Deposit Account No. 50-1170.

Respectfully submitted,

  
Timothy E. Newholm  
Registration No. 34,400

Dated: May 18, 2001  
BOYLE & FREDRICKSON NEWHOLM  
STEIN & GRATZ, S.C.  
250 Plaza, Suite 1030  
250 East Wisconsin Avenue  
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Telephone: 414-225-9755

{00004152.DOC /}

COPY



## UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS  
UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
www.uspto.gov

| APPLICATION NUMBER | FILING DATE | GRP ART UNIT | FIL FEE REC'D | ATTY. DOCKET NO. | DRAWINGS | TOT CLAIMS | IND CLAIMS |
|--------------------|-------------|--------------|---------------|------------------|----------|------------|------------|
| 09/769,577         | 01/25/2001  | 1764         | 790           | 101.003          | 4        | 18         | 4          |

CONFIRMATION NO. 4506

## FILING RECEIPT



\*OC000000005839579\*

BOYLE FREDRICKSON NEWHOLM STEIN & GRATZ SC  
SUITE 1030  
250 EAST WISCONSIN AVENUE  
MILWAUKEE, WI 53202

Date Mailed: 03/08/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Anthony Johnston, New South Wales, AUSTRALIA;  
William Levy, Paris, FRANCE;

## Assignment For Published Patent Application

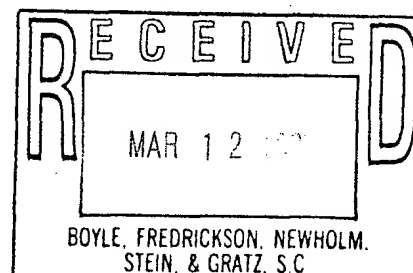
Meggitt (UK) Limited,;

## Continuing Data as Claimed by Applicant

THIS APPLN CLAIMS BENEFIT OF 60/184,004 02/22/2000

~~AND CLAIMS BENEFIT OF 60/384,007 05/04/1998~~

(\*) Data inconsistent with PTO records.



## Foreign Applications

UNITED KINGDOM 0001699.8 01/25/2000  
UNITED KINGDOM 0017187.6 07/13/2000

If Required, Foreign Filing License Granted 03/07/2001

Projected Publication Date: To Be Determined - pending completion of Missing Parts

Non-Publication Request: No

Early Publication Request: No